

WRIT WILL EXPIRE
ON 10-18-21
(90 DAYS FROM THE
DATE FILED)

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

201 WEST

e 9:00 am

(0) 891-4296

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/

Central Penn Capital Management, LLC

2. COURT NUMBER

CV-2018-203563 C

3. DEFENDANT/S/

Can Alphonso Thomas a/k/a Can A. Thomas

4. TYPE OF WRIT OR COMPLAINT

Writ of Possession

SERVE

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVICE

Can Alphonso Thomas a/k/a Can A. Thomas

AT

6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

724 School Lane, Folcroft PA 19032

7. INDICATE UNUSUAL SERVICE: ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHERNow, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of

County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

SHERIFF OF DELAWARE COUNTY

DR-464242 \$250.00

Deputy Sheriff

Invoice No.

Amount Pd

Docket #

Page

DR-458175

\$185.10

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Kimberly A. Bonner Esq. DSDC Law Offices
116 Chocolate Ave, Ste 300
Hershey, PA 17033 (717) 533-3280

10. TELEPHONE NUMBER

717-533-3280

11. DATE

8/18/21

12. SIGNATURE

/s/ K Bonner

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

DR-18-21

15. Expiration/Hearing date

90 days

TO BE COMPLETED BY SHERIFF

16. Served and made known to

on the 3 day of Sept

at

9

S/A

20

21

at

158

o'clock,

P

M.,

Street,

County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
☐ Adult in charge of Defendant's residence.
☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
☐ Agent or person in charge of Defendant's office or usual place of business.

☒ Posted☐ Other

On the

day of

Defendant not found because:

☐ Moved☐ Unknown☐ No Answer☐ Vacant☐ Other

REMARKS:

RETURNED:

SO ANSWER.

17. AFFIRMED and subscribed to before me this

20

20 day of

23

Notary Public

18. Signature of
Dep. Sheriff

21. Signature of Sheriff

19. Date

22. Date

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE.

SHERIFF OF DELAWARE COUNTY

DCSD-1-1989

Eviction & Locks changed by ~~the~~ town property company
eviction was completed and property stored @
metro storage. 1. ISSUING AUTHORITY Owner was advised to be
arrived on property he would be trespassing.

11-16-2021 01:21 PM
OFFICE OF JUDICIAL SUPPORT
DELAWARE COUNTY, PA